The State of New Hampshire
Department of Environmental Services

Robert R. Scott, Commissioner

August 16, 2018

Mr. Allan Palmer
GSP-Merrimack LLC
431 River Road
Bow, New Hampshire 03304

Subject: National Pollutant Discharge Elimination System (NPDES)
Compliance Evaluation Inspection (CEI)
GSP- Merrimack Station(GSP-MS), Bow, NH
NPDES Permit # NH0001465

Dear Mr Palmer:

On July 25th, 2018, as a representative of the New Hampshire Department of Environmental Services (DES), Water Division, Wastewater Engineering Bureau, I conducted a NPDES CEI at Granite Shore Power - Merrimack Station (GSP-MS). Objectives of the CEI included determining compliance with NPDES permit conditions, verifying the accuracy of permit-required information, and verifying the adequacy of permittee sampling and monitoring.

The following people were present during this CEI:

Allan Palmer, Senior Engineer, GSP-MS
Ken Kroh, Chemical Engineer, GSP-MS
Nancy M. Lesieur, Chief Environmental Inspector, NHDES
Haley Franz, Permit Engineer, NHDES

Enclosed is a copy of EPA's Water Compliance Inspection Report Form 3560-3.

During the inspection, no deficiencies were noted. Thus, no response is required by GSP-MS to this inspection.

Please be advised that DES will continue to monitor GSP-Merrimack Station's status, and that this letter does not provide relief against any existing or future violations.

If you have any questions, please call me at 271-2985.

Sincerely,

Nancy M. Lesieur
Chief Environmental Inspector
Compliance Section
Wastewater Engineering Bureau

United States Environmental Protection Agency
Washington, D.C. 20460

Water Compliance Inspection Report

Section A: National Data System Coding (i.e., PCS)

Transaction Code	NPDES	yr/mo/day	Inspection Type	Inspector	Fac Type
1 N	2 5 3 NH0001465 11	12 180725 17	18 C	19 S	20 2

Remarks: 21 ____ 66

Inspection Work Days	Facility Self-Monitoring Evaluation Rating	B1	QA	Reserved	Reserved
67 20 69	70 5	71 N	72 N	73 74	75 80

Section B: Facility Data

Name and Location of Facility Inspected (For industrial users discharging to POTW, also include POTW name and NPDES permit number)

GSP Merrimack Station
431 River Road

Bow NH 03304-

POTW Name/Permit No.

Entry Time/Date	Permit Effective Date
9:00 AM 7/25/2018	7/25/1992
Exit Time/Date	**Permit Expiration Date**
1:15 PM 7/25/2018	7/25/1997

Name(s) of On-Site Representative(s)/Title(s)/Phone and Fax Number(s)

Allan Palmer, Sr. Engineer
Ken Kroh, Chemistry Foreman

Phone: (603)230-7932
Fax:

Other Facility Data (e.g., SIC NAICS, and other descriptive information)

Name, Address of Responsible Official/Title/Phone and Fax Number

James Andrews
CEO, GSP
431 River Rd
Bow, N.H. 03304

Phone: (603)759-3874
Fax:

Contacted ☐ Yes ☑ No

Section C: Areas Evaluated During Inspection (Check only those areas evaluated)

☑ Permit	☑ Self Monitoring Program	☐ Pretreatment	☐ MS4
☑ Records/Reports	☐ Compliance Schedules	☐ Pollution Prevention	
☑ Facility Site Review	☑ Laboratory	☐ Storm Water	
☑ Effluent/Receiving Waters	☐ Operations/Maintenance	☐ Combined Sewer Overflow	
☑ Flow Measurement	☐ Sludge Handling/Disposal	☐ Sanitary Sewer Overflow	

Section D: Summary of Findings/Comments

(Attach additional sheets of narrative and checklists, including Single Event Violation codes, as necessary)

SEV Codes *SEV Description*

Signature of Inspector	Agency/Office/Phone and Fax Numbers NHDES/WD/WWEB (603) 271-3908/4128	8/16/2018
Signature of Management QA Reviewer Teresa Ptak	Agency/Office/Phone and Fax Numbers NHDES/WD/WWEB (603) 271-3908/4128	8/16/2018

INSTRUCTIONS

Section A: National Data System Coding *(i.e., PCS)*

Column 1: Transaction Code: Use N, C, or D for New, Change, or Delete. All inspections will be *new* unless there is an error in the data entered.

Columns 3-11: NPDES Permit No. Enter the facility's NPDES permit number. *(Use the Remarks columns to record the State permit number, if necessary.)*

Columns 12-17: Inspection Date. Insert the date entry was made into the facility. Use the year/month/day format (e.g., 94/06/30 = June 30, 1994).

Column 18: Inspection Type. Use one of the codes listed below to describe the type of inspection:

A Performance Audit
B Compliance Biomonitoring
C Compliance Evaluation (non-sampling)
D Diagnostic
E Corps of Engineers Inspection
F Pretreatment Follow-up
G Pretreatment Audit
I Industrial User (IU) Inspection
L Enforcement Case Support
M Multimedia
O Compliance Evaluation (oversight)
P Pretreatment Compliance Inspection
R Reconnaissance
S Compliance Sampling
U IU Inspection with Pretreatment Audit
X Toxics Inspection
Z Sludge
2 IU Sampling Inspection
3 IU Non-Sampling Inspection
4 IU Toxics Inspection
5 IU Sampling Inspection with Pretreatment
6 IU Non-Sampling Inspection with Pretreatment
7 IU Toxics with Pretreatment

Column 19: Inspector Code. Use one of the codes listed below to describe the *lead agency* in the inspection.

C — Contractor or Other Inspectors *(Specify in Remarks columns)*
E — Corps of Engineers
J — Joint EPA/State Inspectors—EPA Lead
N — NEIC Inspectors
R — EPA Regional Inspector
S — State Inspector
T — Joint State/EPA Inspectors—State lead

Column 20: Facility Type. Use one of the codes below to describe the facility.

1 — Municipal. Publicly Owned Treatment Works (POTWs) with 1987 Standard Industrial Code (SIC) 4952.
2 — Industrial. Other than municipal, agricultural, and Federal facilities.
3 — Agricultural. Facilities classified with 1987 SIC 0111 to 0971.
4 — Federal. Facilities identified as Federal by the EPA Regional Office.
5 — Oil & Gas. Facilities classified with 1987 SIC 1311 to 1389.

Columns 21-66: Remarks. These columns are reserved for remarks at the discretion of the Region.

Columns 67-69: Inspection Work Days. Estimate the total work effort (to the nearest 0.1 work day), up to 99.9 days, that were used to complete the inspection and submit a QA reviewed report of findings. This estimate includes the accumulative effort of all participating inspectors; any effort for laboratory analyses, testing, and remote sensing; and the billed payroll time for travel and pre and post inspection preparation. This estimate does not require detailed documentation.

Column 70: Facility Evaluation Rating. Use information gathered during the inspection (regardless of inspection type) to evaluate the quality of the facility self-monitoring program. Grade the program using a scale of 1 to 5 with a score of 5 being used for very reliable self-monitoring programs, 3 being satisfactory, and 1 being used for very unreliable programs.

Column 71: Biomonitoring Information. Enter D for static testing. Enter F for flow through testing. Enter N for no biomonitoring.

Column 72: Quality Assurance Data Inspection. Enter Q if the inspection was conducted as follow up on quality assurance sample results. Enter N otherwise.

Columns 73-80: These columns are reserved for regionally defined information.

Section B: Facility Data

This section is self-explanatory except for "Other Facility Data," which may include new information not in the permit or PCS (e.g., new outfalls, names of receiving waters, new ownership, and other updates to the record).

Section C: Areas Evaluated During Inspection

Check only those areas evaluated by marking the appropriate box. Use Section D and additional sheets as necessary. Support the findings, as necessary, in a brief narrative report. Use the headings given on the report form (e.g., Permit, Records/Reports) when discussing the areas evaluated during the inspection. The heading marked "Multimedia" may indicate medias such as CAA, RCRA, and TSCA. The heading marked "Other" may indicate activities such as SPCC, BMPs, and concerns that are not covered elsewhere.

Section D: Summary of Findings/Comments

Briefly summarize the inspection findings. This summary should abstract the pertinent inspection findings, not replace the narrative report. Reference a list of attachments, such as completed checklists taken from the NPDES Compliance Inspection Manuals and pretreatment guidance documents, including effluent data when sampling has been done. Use extra sheets as necessary.

NPDES INSPECTION CHECKLIST
MUNICIPAL OR INDUSTRIAL WASTEWATER INDIVIDUAL PERMIT

FACILITY NAME: GSP Merrimack LLC (Granite Shore Power)

NPDES PERMIT NUMBER: NH 0001465

NPDES PERMIT EXPIRATION DATE: July 25th, 1997

I. PRE-INSPECTION INFORMATION

(If Closure Inspection, complete this upper section, Section II and Section XV)

Permittee's Name: GSP-Merr. Station Inspection Date: 7/25/18 Sampling Date: N/A

Inspection Type: CSI (CEI) RI Closure Facility Type: (Major) Minor

Treatment Process: NCCVW Disinfection Process: N/A Grade of Municipal Facility: (NA)

Date of Last Inspection: 3/16/17 Type of Last Inspection: CSI (CEI) RI

Last Inspection Performed by: (DES) EPA

Name and Title of Responsible Official: James Andrews, CEO GSP

Name/Grade of Operator in Responsible Charge: Lin Elizabeth Tillotson, Dir. Admin & Reg. Affairs

Name/Grade of Back-up Operator in Responsible Charge: Allan Palmer, Sr. Engineer.

Contact (Name/Phone) for Information Regarding Collection System: N/A

Time in: 9:00 AM Time out: 01:15 PM

BACKGROUND INFORMATION

(Complete this section prior to going to facility; no need to complete if closure inspection)

1. (YES) NO Are the Discharge Monitoring Reports (DMRs) submitted to EPA and DES on time? *(Permit – Part I)* If no, explain: _____

2. (YES) NO Are the DMRs completed correctly per latest EPA instructions? If no, explain: _____

3. (YES) NO Has a list of permit violation(s) and DMR error(s) been given to the operator and discussed? If no, explain: _____

III. PERMIT

1. (YES) NO NA Is a copy of the current permit (Parts I, II and attachments) onsite? *(40CFR121.41)* If no, explain: _____

2. (YES) NO NA If the permit is expired or due to expire within 180 days, has a reapplication package been submitted to DES and EPA *(40CFR122.21)* If no, explain: _____

IV. OTHER NPDES SPECIFIC REPORTS/REQUIREMENTS

1. _____
2. _____
3. _____
4. _____

V. RECORDS/REPORTS

1. (YES) NO NA Are the records and reports maintained by the permittee for at least 3 years? *(40CFR122.21(p), 40CFR122.41(j)(2), Part II)* If no, explain: _____ (3 year (+)

2. (YES) NO NA If the facility monitors any permitted parameter more frequently than required by the permit, using approved test methods, are these additional results included in its DMR calculations? *(Permit Part II: Section D.1.d)* If no, explain: _____

3. (YES) NO NA Is a random check of analytical results reported on the facilities benchsheets consistent with data reported by the permittee on their DMRs? *(Part II Section C)*. If no, explain: _____

VI. FACILITY SITE REVIEW

1. YES NO (NA) Is there excessive scum buildup, grease, foam, or floating sludge in or on any of the treatment units? *(40CFR122.41(e) and Permit Part II – Section B)* If yes, explain: ___

2. YES NO (NA) Are tank weirs level? *(40CFR122.41(e) and Permit Part II – Section B)* If no, explain: _____

3. YES (NO) Is there any indication of a hydraulic overload? *(40CFR122.41(e) and Permit Part II – Section B)* If yes, explain: _____

else – if chemicals spill into headworks, may adversely affect the process and result in permit violations).

VII. EFFLUENT/RECEIVING WATER

1. YES (NO) NA Are there any floating solids, oil sheen, color, or foam **in the effluent**? *(Observation)* If yes, explain: _____

2. YES (NO) NA Are there any floating solids, oil sheen, color, foam or a recognizable plume **in the receiving water**? *(Permit Part I and Env-Ws 1703.03(c))* If yes, explain: _____

3. Collect sample of effluent. Complete Attachment A.

VIII. FLOW MEASUREMENT

1. (YES) NO NA Are influent (if applicable) and effluent flow measuring device(s) professionally calibrated, at least once per year? *(40CFR122.41(e) and Permit Part II – Section B).*
What type of influent meter is used? _____
What type of effluent meter is used? 003A Ultrasonic Meter. (inverted weir)
If no, explain: Have technical staff in I+C, certified staff

2. (YES) NO NA Do facility personnel check the calibration of the flow measuring device(s) between the annual professional calibrations, at least three times per year? *(Recommendation only).* If no, explain frequency. If yes, do facility personnel record the results of these additional tests, and are the results within 10 percent accuracy? _____
Quarterly Maintenance internally by staff

3. (YES) NO NA Are all effluent flow measuring devices clean and free of debris and deposits? *(40CFR122.41(e) and Permit Part II – Section B)* If no, explain: _____

4. YES NO (NA) Are the sides of the flume(s) throat vertical and parallel? *(40CRF122.41(e) and Permit Part II – Section B)* If no, explain: _____

5. (YES) NO NA Is the effluent weir level? *(40CRF122.41(e) and Permit Part II – Section B)* If no, explain: _____

6. YES (NO) NA Is there any leakage around any of the flow measuring devices? *(40CRF122.41(e) and Permit Part II – Section B)* If yes, explain: _____

12. (YES) NO NA If yes to 11, does the facility acid wash the sampling containers prior to sample collection as required by the approved analytical methods as required by the facility's permit? If no, explain: (Hires EAI, which acid washes)

X. LABORATORY

1. (YES) NO NA Has a written laboratory QA/QC manual been updated by the facility and approved by DES in the last 5 years? *(40CFR122.41(e) and Permit Part II-Section B)* (Complete Attachment B if one has not been completed in past 5 years) If yes, provide date Attachment B completed. If no or NA, explain: Most recent 3/1/18

2. (YES) NO NA Is the QA/QC manual being used by facility personnel? If no explain: _____

3. (YES) NO NA Does the facility have a copy of the EPA-approved analytical methods for each of the analyses performed at the facility? If no, explain: _____

4. (YES) NO NA Are the correct analytical testing procedures used and holding times met? *(Permit Part I and 40CFR136)* (Complete Attachment C) If no, explain: _____

5. (YES) NO NA Are laboratory method detection limits for all parameters tested less than the permit limits? If no, explain: _____

6. (YES) NO NA With each batch of samples analyzed, is the permittee conducting quality control standards, sample duplicates, spikes and blanks? *(Permit Part I and 40CFR136)* (Complete Attachment D) If no explain: _____

7. YES NO (NA) If the permittee is using alternate analytical procedures, have they been approved by EPA? *(40CFR136)* If no, explain: _____

8. (YES) NO NA Is the permittee calibrating and maintaining all laboratory instruments and equipment on the periodic basis specified in the Part 136 Analytical Method or in the QA/QC Manual? *(Annual calibrations for thermometers and balances are required – annual calibrations for all other laboratory instruments are recommended but are not required) (40CFR122.41(e), 40CFR136 and Permit Part II-Section B)* If no, explain: _____

9. (YES) NO NA Are the thermometer annually checked for calibration using a NIST-certified thermometer or does the facility purchase new NIST-certified thermometers yearly?

6. (YES) NO NA Does the facility maintain written procedures for responding to emergencies such as power failures, floods, fires, and other natural disasters? (*40CFR122.41(e) and Permit Part II-Section B*) If no, explain: _____

7. (YES) NO NA Does the facility maintain a written list of contacts for emergencies? (*40CFR122.41(e) and Permit Part II-Section B*) If no, explain: _____

8. (YES) NO NA Is a logbook kept which documents all plant activities on a daily basis? *(40CFR122.41(e), Permit Part II-Section B and 40CFR122.41(j)(2))* If no, explain: Yes and daily round sheets.

9. (YES) NO NA Does the facility maintain an inventory of spare parts, either at the facility or close by, sufficient to keep all of its treatment units operational? *(40CFR122.41(e) and Permit Part II-Section B)* If no, explain: _____

10. (YES) NO NA Does the facility have standby power for all treatment units? (*40CFR122.41(e) and Permit Part II-Section B*) If no, explain: (Power facility)

11. YES NO (NA) Is the standby power regularly exercised under load? **How frequently?** (*40CFR122.41(e) and Permit Part II-Section B*) If no, explain: _____

12. (Different feed from within the facility) NA In an average calendar year how often does the facility experience power outages or power quality issues (i.e. voltage sags/surges or loss of phase) that result in an interruption of disinfection equipment operation? *(40CFR122.41(e) and Permit Part II-Section B*) Please comment on occurrences/frequency: N/A power generating station

13. YES NO (NA) Does the facility make any process modifications during planned generator exercises or during unplanned power outages to prevent undisinfected effluent from exiting the facility? *(40CFR122.41(e) and Permit Part II-Section B*) If no, explain: _____

14. (YES) NO NA Does the facility have Uninterruptible Power Supply (UPS) available to allow for a smooth transition during power outages? *(40CFR122.41(e) and Permit Part II-Section B*) If no, explain: _____

XII. HANDLING AND DISPOSAL OF WASTES

1. YES NO (NA) Is leachate accepted at the facility? If yes, what are the source(s)? _____

What is the average quantity accepted each month? _____

Attachment A - Monitoring Data Checklist

Facility Name: GSP-Merrimack Station Date: 7/25/18 Inspector: Nancy Lesieur

Parameter	O+G	TSS	Fe	Cu	TRC	pH						
Sample Date and Time					✓	✓						
Sample Location[1]					✓	✓						
Sample Type[2]					✓	✓						
Sampler					✓	✓						
Analysis Date and Time	Subcontracted to EAI		1/1/18		✓	✓						
Analyst					✓	✓						
Method No.[3]					SM 4500 OG ✓ 2011	SM 4500 H+B ✓ 2011						
Results[4]					✓	✓						
Allowable Holding Time					✓	✓						

[1] Sampling location representative of wastestream. [2] Correct sample type (grab or composite).
[3] Approved EPA method or ATP approval obtained. [4] Detection limits meet minimum permit requirements.
For reference- 40CFR136.3 Table II select listing for containers, preservation and hold times on reverse.

Inspector Comments:

Attachment B Laboratory Checklist **Facility Name:** GSP-Merrimack Station **Inspection Date:** 7/25/18 NHDES Inspector: Nancy Lesieur	**Reference**	**Y**	**N**	**Comments**
General				
Is the QA/QC Manual current? Date of NHDES approval : In use?	40 CFR 122.41(e) and permit part II section B			3/1/18 Last DES app. 5/1/14
Are EPA approved methods on site for in house analyses? Standard Methods edition used by the laboratory: [ ]	40 CFR 136	✓ ✓		 22nd Edition
Correct sample containers/preservation in use?	40 CFR 136	✓		sub-contracted
Are the composite samplers at ≤6°C? Temperature results recorded?	40 CFR 136 40 CFR 122.41(e) and permit part II section B			N/A
Is the sample storage refrigerator at ≤6°C (≤10°C bacterial tests)?	40 CFR 136			N/A
Expired standards or reagents in use? Proper storage of standards and reagents?	40 CFR 122.41(e) and permit part II section B	✓	✓	
Thermometers				
Are support thermometers calibrated annually? Against a NIST traceable reference [ ] Purchased new w/NIST traceable reference paperwork [ ]	40 CFR 122.41(e) and permit part II section B	✓ ✓		May 19, 2018 TROEMNER
Is the temperature of equipment documented on each day of use?	40 CFR 136	✓		
Lab Water				
Each lot checked for: Conductivity <2 umhos/cm [ ] TRC < detection limit [ ] Other:	40 CFR 136 40 CFR 122.41(e) and permit part II section B	✓ ✓		Have Milli Q system in house

Attachment B Laboratory Checklist Facility Name: GSP - Merrimack Station	Reference	Y	N	Comments
pH	SM 4500 H+B 2011			
Calibration buffers		✓		4, 7, 10 su
QC standard (check calibration)		✓		pre and post 6.00
Duplicate		✓		
Temperature Buffer[ ] Effluent [ ]		✓ ✓		
% slope (recommendation)		✓		
TRC	SM 4500 Cl-G 2011			
QC standard		✓		AMPEROMETRIC Titration 2/2019
Spec checks (Secondary gel std. set HACH)			NA	
Duplicate		✓		
HACH test kit [ ]		✓		
QC standard	NA			
Duplicate				
HACH test kit [ ]				
QC standard		✓		
Duplicate	NA			
Other:				

Compliance Summary for PSNH-Merrimack Station

NPDES Permit Number: NH0001465

Year	Month	Parameter	Units	Permit Limit	Result	Type	Number of Violations	Reported Properly?	Postmark Date	Comments
2015										
	1	DMR						Yes	2/13/2015	
	2	DMR						No	3/12/2015	Reported 3 flow violations when there were none; rec'd amended DMR on 3/16.
	3	DMR						Yes	4/15/2015	
	4	DMR						Yes	5/15/2015	
	5	DMR				No Discharge		Yes	6/15/2015	
	6	fish impingement								2014 annual impingement report submitted. DES date-stamp 7/2/2015
	6	DMR						Yes	7/10/2015	No violations, 001-A,002-A, 003-1,003-A and 003-B
	7	DMR						Yes	8/13/2015	No violations Outfalls 001A,002A,0031 and 003A. No discharge Outfall 003B

Year	Month	Parameter	Units	Permit Limit	Result	Type	Number of Violations	Reported Properly?	Postmark Date	Comments
	8	DMR						Yes	9/14/2015	No violations from Outfalls 001A, 002A, 0031 and 003A. No discharge from Outfall 003B. Attachment N-5 missing on OO3, called A. Palmer, left message on 9/25/15.
	9	DMR						Yes	10/15/2015	No violations
	10	DMR						Yes	11/13/2015	No violations from 001A and 0031 and 003A, no discharge from 002A and 003B
	11	DMR						Yes	12/11/2015	No violations. No discharge from 003-B.
2016										
	1	DMR						Yes	2/12/2016	No violations 001A, 002A, 0031,003A, no discharge 003B.
	2	DMR						Yes	3/14/2016	No violations 001A, 002A, 0031, 003A and no discharge from 003B
	3	DMR						Yes	4/15/2016	No violations Outfalls 001-A, 003-1, 003-A, and no discharge 002-A and 003-B.
	4	2015 Ann Fish Impingement						Yes	4/5/2016	2015 Annual Fish Impingement Report received on 4/5/16
	4	DMR						Yes	6/13/2016	No violations 001A,002A, 0031, 003A, and no discharge 003B

Year	Month	Parameter	Units	Permit Limit	Result	Type	Number of Violations	Reported Properly?	Postmark Date	Comments
	5	DMR						Yes	6/13/2016	No violations 001-A, 003-1, 003-A. No discharge 002-A and 003-B.
	7	DMR						Yes	8/11/2016	No violations Outfalls 001A, 002A ,003-1 and 003A. No discharge Outfall 003B.
	8	DMR						Yes	9/15/2016	No violations 001A,002A,003-1 and 003A. No discharge 003B
	9	DMR						Yes	10/14/2016	No violations 001A,002A,003-1 and 003A. No discharge 003B
	10	DMR						Yes	11/15/2016	No violations, Outfalls 001-A, 003-A and 003-1. No discharge Outfalls 002-A and 003-B.
	11	DMR						Yes	12/15/2016	No violations Outfalls 001A, 002A, 003-1, 003-A and no discharge Outfall 003-B
	12	DMR						Yes	1/12/2017	No violations 001-A, 002-A, 003-1, 003-A, 004-A005-A and no discharge 003-B and 006-A.
2017										
	1	DMR						Yes	2/14/2017	No violations 001A,002A,003-1 and 003A. No discharge 003B
	2	DMR						Yes	3/13/2017	No violations Outfalls 001-A, 002-A, 003-1, 003-A and no discharge Outfall 003-B.

Year	Month	Parameter	Units	Permit Limit	Result	Type	Number of Violations	Reported Properly?	Postmark Date	Comments
	3	DMR						Yes	4/14/2017	No violations 001A, 002A, 003A, 003-1 and no discharge 003B.
	3	2016 Fish Impingement						Yes	12/20/2017	2016 Annual Fish Impingement Report received by NHDES on 12/21/17
	4	DMR						Yes		No violations Outfalls 003-1, 003-A and no discharge Outfalls 001-A, 002-A and 003-B
	5	DMR						Yes		No violations Outfalls 001-A, 002-A, 003-1, 003-A and no discharge Outfall 003-B.
	6	DMR DMR						Yes	7/5/2017	No violations Outfalls 001-A, 002-A, 003-1, 003-A and no discharge Outfall 003-B.
	7	DMR						Yes	8/8/2017	No violations Outfalls 001-A, 002-A, 003-1, 003-A and no discharge Outfall 003-B.
	8	DMR						Yes	9/13/2017	No violations Outfalls 001-A, 002-A, 003-1, 003-A and no discharge Outfall 003-B.
	9	DMR						Yes		No violations Outfalls 001-A, 002-A, 003-1, 003-A and no discharge Outfall 003-B.

Year	Month	Parameter	Units	Permit Limit	Result	Type	Number of Violations	Reported Properly?	Postmark Date	Comments
	10	DMR						Yes	11/15/2017	No violations Outfalls 001-A, 002-A, 003-1, 003-A and no discharge Outfall 003-B.
	11	DMR						Yes	12/15/2017	No violations Outfalls 002-A, 003-1, 003-A and no discharge Outfalls 001-A and 003-B.
	12	2016 Annual Fish						Yes		2016 Annual Fish Impringement report received on 12/21/17 at NHDES (yes, 2016 not 2017)
	12	2016-17 Annual Report						Yes	12/20/2017	2016-2017 Annual Report of monthly data from the four monitoring stations, received at NHDES on 12/20/17
	12	DMR						Yes	1/10/2018	No violations Outfalls 001A, 002-A, 003-1, 003-A, 004-A, 005-Aand no discharge Outfalls 001-A and 006-A.
2018										
	1	DMR						Yes	2/15/2018	No violations Outfalls 001A, 002-A, 003-1, 003-A, 004-A, 005-A and no discharge Outfalls 001-A and 006-A.
	2	DMR						Yes	3/13/2018	No violations Outfalls 001A, 002-A, 003-1, 003-A, 004-A, 005-A and no discharge Outfalls 001-A and 006-A.

Year	Month	Parameter	Units	Permit Limit	Result	Type	Number of Violations	Reported Properly?	Postmark Date	Comments
	3	DMR						Yes	4/13/2018	No violations Outfalls 001A, 002-A, 003-1, 003-A, 004-A, 005-A and no discharge 003-B and 006-A.
	4	DMR						Yes	5/15/2018	No violations Outfalls 001A, 002-A, 003-1, 003-A, 004-A, 005-A and no discharge Outfalls 001-A and 006-A.
	5	DMR						Yes	6/8/2018	No violations Outfalls 003-1, 003-A, and no discharge Outfalls 001-A, 002-A and 003-B.

Google Maps


Ensio Resources
River Rd
River Rd
Merrimack River
Structures Unlimited
Dubeau Dr
River Rd
Brown's
Repair
Dubeau Drive
Merrimack Station
River Rd
Google